SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 67 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) RON JOHNSON VICTORY Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MASTERSON, NANCY, J., MRS., Date of Receipt Mailing Address 1285 GULF SHORE BLVD N 2022 City Zip Code State Transaction ID: SA11A.271950 FL **NAPLES** 34102-4936 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) THE MASTERSON COMPANY INC **OWNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MATTESON, SHIRLEY, C.,, Date of Receipt Mailing Address 620 SAND HILL ROAD 15 2022 **APT 400D** City State Zip Code Transaction ID: SA11A.276971 **PALO ALTO** CA 94304-2602 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS CONTRIBUTION INFORMATION REQUESTED PER BE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MCCOLLUM, IRA, WILLIAM, , JR. Date of Receipt Mailing Address 600 THISTLEWOOD COURT 09 2022 City Zip Code State Transaction ID: SA11A.305235 FL LONGWOOD 32779-3379 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION DENTONS US LLP **ATTORNEY** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 7000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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